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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Thom Tillis Committee PO Box 97396 ADDRESS (number and street) (Check if address is changed) Raleigh 27624 NC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tillis@cmandco.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00545772 FEC IDENTIFICATION NUMBER > 3. IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. McMichael, Collin, , , Type or Print Name of Treasurer McMichael, Collin, , , [Electronically Filed] 05 26 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FEC Fo i	rm 1 (Revised 02/2009) Page 2	
		COMMITTEE	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Nam Cand	e of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Tillis, Thom, R., Sen.,	
Can	didate y Affiliatio	on REP Office State President District	
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee:	
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Part	y.
Poli	itical A	action Committee (PAC):	_
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is	a:
		Corporation Corporation w/o Capital Stock Labor Organization	
		Membership Organization Trade Association Cooperative	
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or part committee. (i.e., nonconnected committee)	y
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	ıt Fund	draising Representative:	_
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.	
	Com	umittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number]
	4.		ĺ

FEC Form 1 (Revised 02/200	9)	Page 3
Write or Type Committee Name	5,	- Tage •
Thom Tillis Comm	ttee	
	zation, Affiliated Committee, Joint Fundraising Representativ	
		o, or accessing three openion
Tillis Majority Committee	<u> </u>	
Mailing Address	3ox 97275	
Rale	eigh NC	27624
	CITY STATE	ZIP CODE
Relationship: Connected Orga	nization Affiliated Committee X Joint Fundraising Represer	ntative Leadership PAC Sponsor
. Custodian of Records: Identify by books and records.	name, address (phone number optional) and position of the	person in possession of committee
McMichael, Colli	٦, , ,	
	Box 97396	
Mailing Address		
L LRali	eiah , NC ,	,27624-
	/gu	
Title or Position	CITY STATE	ZIP CODE
Custodian	Telephone number	919 - 889 - 1817
. Treasurer: List the name and addr any designated agent (e.g., assista	ess (phone number optional) of the treasurer of the committe nt treasurer).	ee; and the name and address of
Full Name McMichael, Collin	1, , ,	
of Treasurer	Box 97396	
Mailing Address	70X 01 000	
Rale		27624
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	919 - 889 - 1817

FEC Form 1 (R	evised 02/2009)		Page 4
Full Name of			
Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	Teleph	one number	
safety deposit boxes or	sitories: List all banks or other depositories in which the	. ₁ 10 fands, 11	
Name of Bank, Deposit			1 1 1 1 1 1 1 1
Name of Bank, Deposit	tory, etc.		1 1 1 1 1 1 1 1 1
Name of Bank, Deposit	tory, etc. uesta Bank		
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Name of Bank, Deposit	tory, etc. uesta Bank	NC 2803	1
Name of Bank, Deposit	tory, etc. uesta Bank 19510 Jetton Road	NC 2803 STATE	1 ZIP CODE
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Name of Bank, Deposit Mailing Address Name of Bank, Deposit	tory, etc. uesta Bank 19510 Jetton Road Cornelius CITY tory, etc.		ZIP CODE

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi r	ig Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Tillis-NRSC Com	mittee		
Mailing Address	228 S Washington St		
	1		
	Alexandria	, VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE A
riciationship.	CITT A	SIAIE	ZIF CODE A
	d Organization Affiliated Committee Join y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		at Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		at Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		at Fundraising Representa	Leadership PAC Sp
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Page ___6 **of** ___33___

or(h). Joint Fundraisi r	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fundral	ising Representative	e, or Leadership PAC Sponsor
2016 HLLIS SEN	ATE CANDIDATE FUND		
Mailing Address	824 S MILLEDGE AVE STE 101		
	Athens	GA GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	-undraising Representa	Leadership PAC Sponso
Full Name	y by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
	I	ephone Number	
safety deposit boxes or m	cries: List all banks or other depositories in which the aintains funds. Citizens Bank 7001 Falls Of Neuse Rd	ne committee deposit	s funds, holds accounts, rents
	Raleigh	NC NC	27615

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:			
1.		FEC ID	number	С
2.		FEC ID	number	С
3.		FEC ID	number	С
4.		FEC ID	number	C
ame of Any Connected	Organization, Affiliated Committee, Joi	nt Fundraising Rep	esentative	e, or Leadership PAC Spon
CHAIRMAN'S VI	CTORY FUND			
1				
Mailing Address	228 S WASHINGTON ST STE 115			
			1 1 1	
	Alexandria	1	VA	22314
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
П	d Organization Affiliated Committee	X Joint Fundraising		
Full Name	1			
Full Name				
	CITY A	\$	TATE A	ZIP CODE A
Mailing Address	CITY A	Telephone Nu		
Mailing Address	CITY A			
Mailing Address TITLE OR POSITION	CITY ▲ Ories: List all banks or other depositories	Telephone Nu	mber	ZIP CODE A
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Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	city A cries: List all banks or other depositories aintains funds. Fargo	Telephone Nu	mber	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
DEFEND THE SE	ENATE		
<u>.</u>			
	228 S WASHINGTON STREET SUITE 115		
Mailing Address	220 3 WASHINGTON STREET SUITE 113		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identif	y by name, address (phone number – optional)		
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esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
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FEC Form 1S (Revised 02/2017)

or(h). Joint Fundrais	ng Participant:		
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2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	d Organization, Affiliated Committee, Joint Fundra ALL 2020	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	901 N WASHINGTON STSUITE 700		
	ALEXANDRIA	ı VA ı	, 22314
Dolotionobin			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponso
Designated Agents Ident			
Full Name	ify by name, address (phone number – optional)		
	ify by name, address (phone number – optional)		
Full Name	ify by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

5(a)	or(h). Joint Fundraisin	a Participant		
5(<u>g</u>) (1	g Farticipant:	FEC ID number	C
	2.		FEC ID number	С
			FEC ID number	С
	3.			
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	SENATE VICTOR	RY 2020		
	Mailing Address	228 S. WASHINGTON ST.STE. 115		
		ALEXANDRIA	, VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.				
0.	Designated Agent: Identify	by name, address (phone number - optional)		
0.	Pull Name	by name, address (phone number – optional)		
0.		by name, address (phone number – optional)		
0.	Full Name	by name, address (phone number – optional)		
o.	Full Name	by name, address (phone number – optional)		
0.	Full Name	CITY A		ZIP CODE A
0.	Full Name	CITY A	STATE A	ZIP CODE A
0.	Full Name	CITY A		ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION	CITY CITY Te	STATE A	
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9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY CITY Te	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Te	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Te	STATE A	

FEC Form 1S (Revised 02/2017)

1.						
				FEC ID	number	С
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lame of Any Connected			tee, Joint Fund	Iraising Repr	esentativ	e, or Leadership PAC Spon
Mailing Address	228 S. WAS	HINGTON ST.STE.	115			
	Alexandria			1 1 I	VA	22314
Relationship:		CITY A			STATE A	ZIP CODE ▲
esignated Agent: Identif	fy by name, add	lress (phone numb	er – optional)			
Full Name	1 1 1 1 1 1				1 1 1	
Full Name						
Mailing Address		CITY A			TATE A	ZIP CODE A
					TATE A	
Mailing Address TITLE OR POSITION	N ▼	CITY A		S'	TATE mber	
Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or main and of Bank, repository, etc.	N ▼	CITY A		S'	TATE mber	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
Tillis Daines Majo	ority Committee		
	₁ PO Box 97275		
Mailing Address			
	Raleigh	NC NC	27624
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC S
	Affiliated Committee Joi	int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif		int Fundraising Represent	ative Leadership PAC S
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FEC Form 1S (Revised 02/2017)

	Participant:			
1.		FEC ID	number	С
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ame of Any Connected C	rganization, Affiliated Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spor
2019 SENATORS	CLASSIC COMMITTEE			
Mailing Address	228 S. WASHINGTON STREET			
	SUITE 115			
	ALEXANDRIA	, , , , , ,	VA	22314
Relationship:	CITY A		STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee	Joint Fundraising	Representa	ative Leadership PAC S
	Organization Affiliated Committee by name, address (phone number – optic	Joint Fundraising	Representa	Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
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=	l Organization, Affiliated Committee, Joint Fundra LEAGUES VICTORY COMMITTEE	aising Representative	e, or Leadership PAC Spon
TILLIS AND COL	LEAGUES VICTORT CONNINTTEE		
Mailing Address	228 S. WASHINGTON ST		
Maining / Idanoss	STE. 115		
	ALEXANDRIA	ı VA	22314
Relationship:	CITY A	STATE A	ZIP CODE A
riciationship.			
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

n). Joint Fundraising		1		
1.			EC ID number	C
2.		FE	EC ID number	C
3.		FE	EC ID number	C
4.		FE	EC ID number	С
ame of Any Connected C	rganization, Affiliated Committee, Jo	oint Fundraisinç	g Representativ	e, or Leadership PAC Spor
GARDNER TILLIS	VICTORY			
Mailing Address	228 S. WASHINGTON ST			
	STE. 115			
	ALEXANDRIA		VA	22314
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
	Organization Affiliated Committee	Joint Fundr	aising Represent	ative Leadership PAC S
Connected			raising Represent	ative Leadership PAC S
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Connected esignated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee by name, address (phone number – op	ptional)		
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Organization Affiliated Committee by name, address (phone number – op CITY A es: List all banks or other depositories	ptional) Telepho	STATE A	ZIP CODE A
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoric fety deposit boxes or mair arme of Bank,	Organization Affiliated Committee by name, address (phone number – op CITY A es: List all banks or other depositories	ptional) Telepho	STATE A	ZIP CODE A
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositorion fety deposit boxes or main ame of Bank, epository, etc.	Organization Affiliated Committee by name, address (phone number – op CITY A es: List all banks or other depositories	ptional) Telepho	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	draising Representativ	e, or Leadership PAC Spon
Perdue-Tillis Vict	ory Fund		
	PO Box 60148		
Mailing Address			
	Washington	DC	20039
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC S
	Affiliated Committee Joint Joi	int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi		FEC ID number	C
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
WHITEFISH VIC	TORY		
Mailing Address	228 S. WASHINGTON ST.		
Mailing / Marioso	STE. 115		
	Alexandria	VA	22314
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC Sp
	Affiliated Committee Joint	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identii Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) o	r(h). Joint Fundraisin g	p Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundra MAJORITY COMMITTEE	ising Representative	e, or Leadership PAC Sponsor
	SULLIVAIN TILLIS	WAJORITI COMMITTEE		
	Mailing Address	PO BOX 97275		
		RALEIGH	NC NC	27624
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name			
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY		
-	Full Name	CITY A Tele ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
-	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A Tele ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
-	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY A Tele ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
-	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A Tele ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisir	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
Name of Any Connected KEEP THE SENA	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 76024		
	WASHINGTON	DC	20002
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Spo
		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		int Fundraising Represent	Leadership PAC Spo
Designated Agent: Identif		int Fundraising Represent	Leadership PAC Spo
Designated Agent: Identif		int Fundraising Represent	Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Spo
Designated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(g) or (h). Joint Fundraisi	ng Participant:			
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
		mmittee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
TILLIS-ERNST V	ICTORY FUND			
	∣ PO BOX 97275			1
Mailing Address				
	RALEIGH		NC NC	27624
Relationship:	C	TY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated	Committee X Joint	Fundraising Representa	Leadership PAC Sponsor
Designated Asserts Identifi	· . b			
 Designated Agent: Identif 	y by name, address (phone	number – optional)		
Full Name				
Mailing Address				
TITLE OR POSITION	CIT	Y ▲	STATE ▲	ZIP CODE ▲
		Te	lephone Number	
		depositories in which	the committee deposit	s funds, holds accounts, rents
safety deposit boxes or m	aintains funds.			
Name of Bank, Depository, etc.				
Mailing Address				
3				
			.	
	CIT	Y A	STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

2.		FEC ID number	C
1		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
•	Organization, Affiliated Committee, Joint Fundra VICTORY COMMITTEE 2020	aising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 97275		
J			
	RALEIGH	NC	27624
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
Mailing Address			1 1 1 1 1 1 1 1 1
TITLE OD DOCITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	•	STATE lephone Number	ZIP CODE ▲
	▼ 	lephone Number	
anks or Other Depositori	Tel	lephone Number	
anks or Other Depositoriafety deposit boxes or mai	Tel	lephone Number	
tanks or Other Depositoriafety deposit boxes or mai	Tel	lephone Number	
Banks or Other Depositorial afety deposit boxes or mai lame of Bank, Depository, etc.	Tel	lephone Number	

FEC Form 1S (Revised 02/2017)

5(a)	or(h). Joint Fundraising	n Participant:						
O(9)	1.	, . a. a.e.paa.		FEC ID	number	С		
	2.			_ │ FEC ID	number	С		
				ー □ FEC ID	number	С		
	3.			_	number	С	-	
	4.]	number	U		
6.	Name of Any Connected of THE VICTORY CL		ited Committee, Joint F	undraising Rep	resentativ	e, or Leade	rship PAC	Sponsor
				1 1 1 1 1 1			1 1 1	
	Mailing Address	PO BOX 60148						
		WASHINGTON		1	DC	20039		1
	Relationship:		CITY A		STATE A		ZIP COD	DE 🛦
	Connected	Organization A	Affiliated Committee	Joint Fundraising	Renresent	ative I	eadershin	PAC Sponsor
		3						
8.	Designated Agent: Identify	by name, address ((phone number – option	al)				
	Full Name							
	Mailing Address							
		1		1	1 , 1	1		1
		_	CITY ▲	5	STATE A		ZIP CODE	A
	TITLE OR POSITION	V		Telephone Nu	ımber			
9.								
	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.		r other depositories in w	rhich the commit	ee deposit	s funds, hol	ds accoun	ts, rents
	safety deposit boxes or main Name of Bank,		r other depositories in w	hich the commit	ee deposit	s funds, hol	ds accoun	ts, rents
	Name of Bank, Depository, etc.		r other depositories in w	rhich the commit	ee deposit	s funds, hol	ds accoun	ts, rents
	Name of Bank, Depository, etc.		r other depositories in w	rhich the commit	ee deposit	s funds, hol	ds accoun	ts, rents

FEC Form 1S (Revised 02/2017)

5(a)	or(h). Joint Fundraisin	g Participant:		
- (3)	1.	• • • • • • • • • • • • • • • • • • •	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	4.			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
		ALL COMMITTEE III		
	Mailing Address	901 N WASHINGTON ST		
		SUITE 700		
		ALEXANDRIA	, , , VA ,	22314
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected		Fundraising Representa	
		Torganization Primiting Committee	Tunaraioning Hopresonia	Ecadolollip 17/6 Opolisol
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address	1		
		1		
		CITY ▲	STATE ▲	ZIP CODE A
	TITLE OR POSITION	•	1	211 0052 4
		Te	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.			
	Mailing Address			
		CITY A	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(a)	or(h). Joint Fundraisin	g Participant:		
(9)	1.	,	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4			0
6.	Name of Any Connected SECURING OUR	Organization, Affiliated Committee, Joint Fundra MAJORITY 2020	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	824 S MILLEDGE AVE STE 101		
		Athens	GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	_		lephone Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which tintains funds.	the committee deposite	s funds, holds accounts, rents
	Depository, etc.			
	Mailing Address			
			1 1 1	

FEC Form 1S (Revised 02/2017)

Page $\underline{^{25}}$ of $\underline{^{33}}$

TITLE OR POSITION Banks or Other Deposito afety deposit boxes or management of Bank, Depository, etc. Mailing Address	ries: List all banks or		STATE A relephone Number the committee deposit	zip code 🛦
Banks or Other Deposito cafety deposit boxes or management of Bank, Depository, etc.	ries: List all banks or		elephone Number	
Banks or Other Deposito cafety deposit boxes or management of Bank, Depository, etc.	ries: List all banks or		elephone Number	
Banks or Other Deposito afety deposit boxes or ma	ries: List all banks or		elephone Number	
Banks or Other Deposito	ries: List all banks or		elephone Number	
			elephone Number	
TITLE OR POSITION	V	1		ZIP CODE ▲
TITLE OR POSITION	▼	CITY A	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name				
Designated Agent: Identify	ν by name, address (μ	ohone number – optional)		
Connected	d Organization Af	ffiliated Committee	t Fundraising Representa	ative Leadership PAC Spo
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
	ALEXANDRIA		VA	22314
Mailing Address	SUITE 115			
Mailing Address	228 S. WASHINGT	ON STREET		
SAVE THE SENA	=	ed Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponso
4.			. LO ID Humbel	0
l l			FEC ID number	C
3.			FEC ID number	C
2		1	FEC ID number	
2				

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page <u>26</u> **of** <u>33</u>

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
FRIENDS OF MI	TT JOINT FUNDRAISING COMMI	TTEE	
			1
Mailing Address	138 CONANT STREET SECOND FLOOR		
Mailing Address			
	BEVERLY	ı ı MA ı	, 01915
Relationship:	CITY ▲	STATE A	ZIP CODE A
		oint Fundraising Representa	
Full Name	fy by name, address (phone number – optional)		1
Mailing Address			
Mailing Address			
Mailing Address			
Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	CITY A	STATE Telephone Number	ZIP CODE A
TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	ories: List all banks or other depositories in wh	Telephone Number	
TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	ories: List all banks or other depositories in wh	Telephone Number	
TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ories: List all banks or other depositories in wh	Telephone Number	
TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ories: List all banks or other depositories in wh	Telephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin	g raiticipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Hold the Line 202	U 		
Mailing Address	228 S. Washington St		
mailing / taurees	STE 115		
	Alexandria	VA	22314
Relationship:	OITV A	STATE A	ZIP CODE ▲
	CITY I Organization	t Fundraising Representa	ative Leadership PAC Sp
Connected			ative Leadership PAC Sp
Connected esignated Agent: Identify	Organization Affiliated Committee X Join		ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee X Join		ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	Affiliated Committee Join by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee Join by name, address (phone number – optional)		Leadership PAC Sp
Connected esignated Agent: Identify Full Name	Affiliated Committee by name, address (phone number – optional) CITY	t Fundraising Representa	
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee by name, address (phone number – optional) CITY CITY Ties: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	Affiliated Committee by name, address (phone number – optional) CITY CITY Ties: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mata ame of Bank, epository, etc.	Affiliated Committee by name, address (phone number – optional) CITY CITY Ties: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Farticipant.		The second secon
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
SENATE MAJOR	RITY FIREWALL 2020		
	824 SOUTH MILLEDGE AVENUE		
Mailing Address			
	STE 101		
	Athens	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	st Fundraising Represent	
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(a)	or(h). Joint Fundraising	a Participant:		
- (3)	1.	,	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4			
6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	TILLIS VICTORY			
	Mailing Address	228 S. WASHINGTON ST		
		STE. 115		
		ALEXANDRIA	ı VA	22314
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		1	1 1 1	
		CITY A	STATE ▲	ZIP CODE A
	TITLE OR POSITION	1	STATE A	ZIP CODE ▲
	TITLE OR POSITION	•	STATE A	ZIP CODE 🛦
9.		Te ies: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor	Te ies: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank,	Te ies: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	Te ies: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	Te ies: List all banks or other depositories in which	elephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi r	ig Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
GOP SENATE VI	CTORY 2020		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	, , VA	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Joint by by name, address (phone number – optional)		
esignated Agent: Identif	d Organization Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representation	
esignated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee Joint by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee Joint by by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mailing and ma	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Anks or Other Deposite afety deposit boxes or mame of Bank,	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

L					
y name, address	(phone number – opti	onal)			
Organization	Affiliated Committee	X Joint Fundrais	ng Represent	ative Le	eadership PAC S
	CITY A		STATE A		ZIP CODE A
#213 HOUSTON			, TX	77008	
1305 W 11TH ST					
_	#213 HOUSTON	HOUSTON CITY Organization Affiliated Committee	#213 HOUSTON CITY A	#213 HOUSTON CITY STATE Organization Affiliated Committee X Joint Fundraising Represent	#213 HOUSTON CITY STATE Organization Affiliated Committee X Joint Fundraising Representative Le

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n). Joint Fundraising			1		
1.				FEC ID number	C
2.				FEC ID number	С
3				FEC ID number	C
4.				FEC ID number	C
		l Committee, Join	t Fundraisi	ng Representativ	ve, or Leadership PAC Sp
TILLIS AND FRIEN	IDS				
Mailing Address	228 S. WASHINGTON	N ST.			
	STE. 115				
	ALEXANDRIA	1 1 1 1 1 1		, VA	22314
Relationship:		CITY A		STATE A	ZIP CODE A
	Organization Affilia	ated Committee	X Joint Fur	ndraising Represen	tative Leadership PAC
Connected esignated Agent: Identify				ndraising Represen	tative Leadership PAC
Connected esignated Agent: Identify Full Name				ndraising Represen	tative Leadership PAC
Connected esignated Agent: Identify				ndraising Represen	Leadership PAC
Connected esignated Agent: Identify Full Name				ndraising Represen	Leadership PAC
Connected esignated Agent: Identify Full Name		one number – optic	onal)		Leadership PAC
Connected esignated Agent: Identify Full Name	by name, address (pho	one number – optic	onal)		
Connected esignated Agent: Identify Full Name Mailing Address	by name, address (pho	one number – opti	onal)		
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositorion fety deposit boxes or main	by name, address (pho	one number – optic	onal)	STATE A	
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoric	by name, address (pho	one number – optic	onal)	STATE A	ZIP CODE A
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Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositorion fety deposit boxes or main ame of Bank, epository, etc.	by name, address (pho	one number – optic	onal)	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	9		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Friends of Thom	Tillis		
	PO Box 60148		
Mailing Address			
	Washington	DC DC	20039
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	ed Organization	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	st Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY To	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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